SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

Bayfield Co. Zoning Dept.

25

Amount Paid: \$125 8-21-14
Amount Paid:

125

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSI

< ?:			Section	11	1/4,	PROJECT LOCATION		Authorized Agent: {Per	Contractor: 50 F	$\times \times \times C_{n}$	A dence of the posterior	大arl L	Owner's Name:	TYPE OF PERMIT REC	
Cleek of Failumain sine of Floodbiants	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)		, Township	D 777	1/4D0 0 Gov/t Lot Lot(s)	Legal Description: (Use Tax Statement)		Authorized Agent: (Person Signing Application on behalf of Owner(s))		autwell Rd) Deaver		TYPE OF PERMIT REQUESTED→ X LAND USE □ SAN	
if yescontinue	r, Stream (Incl. Intermit		W	Towno	CSM	-7-1-4-100-40	DINI (73 digita)	Agent Phone:	Contractor Phone:	Barnes, L	City (8*-+- (7)n.	Sole Tower	Mailing Address:	☐ SANITARY ☐ PRIVY	
	Distance Structure is from Shoreline:		Bames	;; ;	rage Lot(s) No. Block(s) No.	04-00-4-04-04-04-05-000-03600		Agent Mailing Address (include City/State/Zip):	Plumber:	Barnes, WI 54873	~	Sole Tower Lone NW Rochester, MN 55901	City/State/Zip:	☐ CONDITIONAL USE ☐ SPEC	
				Lot Size	Subdivision:	Volume 663	וכ	State/Zip):				N 55901	•	□ SPECIAL USE □ B.O	
Floodplain Zone? Present?	Ą		1.633	Acreage		Page(s) 160	* (i e Property Ownership	Written Authorization Attached Or Yes X No	Plumber Phone:		Cell Phone:	529-0891	Telephone: 507	☐ B.O.A. ☐ OTHER	

Existing Structure				***************************************	00000	~ ~ ~		Value at Time of Completion * include donated time & material
Existing Structure: (If permit being applied for is relevant to it)		Property	☐ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	☐ Addition/Alteration	New Construction	Project
r is relevant to it)		□ Foundation	□ No Basement	□ Basement	☐ 2-Story	☐ 1-Story + Loft X Year Round	∧ 1-Story	# of Stories and/or basement
Length:						X Year Round	Seasonal	Use
			X None		□ 3	□ 2	□ 1	# of bedrooms
Width: Height:	X None	□ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	□ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
>			I	//	又	□ Well	☐ City	Water

□ Non-Shoreland

Shoreland

凶s Property/Land within 1000 feet of Lake, Pond or Flowage

If yes---continue

1

Distance Structure is from Shoreline:

Is Property in Floodplain Zone?

Pes

No

Are Wetlands
Present?

Present?

No

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rioposea construction.		A Marie Control of Con		iieigiic.	
Proposed Use	1	Proposed Structure		Dimensions	Square Footage
	×	Principal Structure (first structure on property)	~ \	「 カア× カガ	476
		Residence (i.e. cabin, hunting shack, etc.)	_	×)	(
•		with Loft	_	×)	
★ Residential Use		with a Porch	(x)	
		with (2 nd) Porch	^	×)	
•		with a Deck	(x)	
		with (2 nd) Deck	-	x)	
☐ Commercial Use		with Attached Garage		×	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(х)	
		Mobile Home (manufactured date)	(×	
:		Addition/Alteration (specify)	_	x)	
Municipal Use		Accessory Building (specify)	(x)	
		Accessory Building Addition/Alteration (specify))	х)	
Rec'd for Issuance	ALC: A THE PARTY.				
; ;	÷	Special Use: (explain))	х)	
		Conditional Use: (explain))	x)	
	-	Other: (avalia)	1	×	

Secretarial Staff

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) (we) make seen examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield county relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the parties of inspection. 8-19-14

Owner(s): 🗶 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

Date

Copy of Tax Statement Copy of Tax Statement Fyou recently purchased the property send your Recorded Deed RSE SIDE DES NOT WEED ITS LE

AUTHORIZATION FROM LETTH & MARY.

Noos

Address to send permit

SAME

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above

Hold For Sanitary: Hold For TBA: Hold For TBA:) z ,	Condition(s): Town, Committee or Board Conditions Attached? Thes I May not be used for human habitate	Ol softractes.	Was Parcel Legally Created	Granted by Variance (B.O.A.) ☐ Yes ⊀ No Case #:	Lot KYes (Deed of Record) 201 ship Yes (Fused/Contiguous Lot(s) ing Yes	087	Issuance Information (County Use Only) Sanitary Permit Denied (Date): Reason	(9) Stake or Mark Proposed Location(s) of New NOTICE: All Land Use Permits Expire Construction Of New One & Two Family The local Town, Villagorian Properties of New One & Two Family Properties of New One & Two Family Properties of New One & Two Family Properties of New Proposed Location(s) of New Proposed Locatio	Prior to the placement or construction of a structure more than ten (10) feet but less than one previously surveyed corner to the other previously surveyed corner, or verifiable by the marked by a licensed surveyor at the owner's expense.	Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimum orbits are residuely currous or marked by a lineared surveyor at the property of the placement of the placement of the property of the placement of the property of the placement of the placem	Setback to Septic Tank or Holding Tank	Setback from the North Lot Line Lalk Ulff Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line Setback from the East Lot Line	Setback from the Centerline of Platted Road 450 Setback from the Established Right-of-Way 4307	Description	Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point)	26		Didcere	(4) Show: (5) Show: (6) Show any (*): (7) Show any (*): (8) Well (W); (*) See: (8) Well (W); (*) See: (9) Well (W); (*) River; (10) Show any (*): (11) Wetlands; or (*)	Show Location of (*):
Hold For Affidavit:	tusture.	TWO BY MINTULLERY NEED TO be attached.) Total No -(If No they need to be attached.) Total No -(If No they need to be attached.)		Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance (B.O.A.).	272 □ No Mino	Date: 9./17-14	Sanitary Number: Reason for Denial: Conservation of the second of the s	Iction, Septic Tank (ST), Dra	placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from by surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be licensed surveyor at the owner's expense.	Feet Feet Feet Frequired setback, the boundary line from which the setback must be measured.		Feet Feet	Feet Setback from the Lake (ordinary high-water mark) → Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff	Measurement Description	A Gut	34 / 150°	150	erel Lake	All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	*) Examples Dand (Nisma Eroptson Road)
17-74		M Stucture	Zoning District Lakes Classification (2)	XYes XYes	Case #;	Affidavit Required ☐ Yes 🗷No Affidavit Attached ☐ Yes 🗷No		Sanitary Date:	<u>(Tank (HT), Privy (P)</u> , and <u>Well</u> (W). has not begun. Uniform Dwelling Code.	ich the setback must be measured must be visible from set of the proposed site of the structure, or must be	must be visible from one previously surveyed corner to the	$ \cdot $	NA O'res NA MA	-water mark) $/50$ Feet $/0.04$, Feet $/0.04$ Feet	Measurement	$\frac{\sqrt{e}}{\sqrt{e}}$ Relationship to the Planning & Zoning Dept.	 60.			and/or (*) Privy (P)	

SUBNETT: COMPLETED APPLICATION, TAX Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

> BAYFIELD COHNAY, WISCONSIN Date Stamp Received) APPLICATION FOR PERMIT

Comme 和8262014

Date: Amount Paid: Permit #: \$658-3614 であって の戸上

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Departmen

Bayfield Co. Zonling Dept.

Refund:

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TYPE OF PERMIT REQUESTED—▶ | 👗 LAND USE Contractor:

Se (F

Authorized Agent: |Person Signing Application Proposed Construction **Existing Structure:** X Non-Shoreland ☐ Shoreland Address of Property: Je17024 of Completion Value at Time donated time & SCANO PROJECT LOCATION Secretarial Staff

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[We] Jectare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable. The purpose of inspection. Owner(s): Rec'd for Issuance Municipal Use Commercial Use S. Residential Use Proposed Use n Section 000 1/4 ·-----Emmis \mathfrak{D} New Construction

Addition/Alteration Comments Surrection Streets (if permit being applied for is relevant to it) \sqsupset Is Property/Land within 1000 feet of Lake, Pond or Flowage Legal Description: SICE Conversion
Relocate (exi Property Run a Business on , Township Project \Box Other: (explain) Conditional Use: (explain) Special Use: (explain) Residence Principal Structure (first structure on property) **Accessory Building** Addition/Alteration (specify) Mobile Home (manufactured date) **Bunkhouse** w/ (\square sanitary, or \square sleeping quarters, or \square Accessory Building Addition/Alteration (specify) ROAD (Use Tax Statement) COCK behalf of Owner(s)) N, Range (i.e. cabin, hunting shack, etc. with Loft and/or basement with a Deck with (2nd) Deck with a Porch with (2nd) Porch with Attached Garage 1-Story Foundation 2-Story 1-Story + Loft # of Stories No Basement Basement 0 Lot(s) SANITARY [] P (specify) PACINES Contractor Phone: 0, PIN: (23 digits)
-3-45:07-08-360-153-31000 ≶ Agent Phone: City/State/Zip: If yes---continue 쭚 Proposed Structure Length: Length: Seasonal Year Round Vol & Page PRIVY Town of: Barnes かいと Use 8 Plumber: CONDITIONAL USE City/State/Zip: Agent Mailing Address (include City/State/Zip): X None Distance Structure is from Shoreline : さら Distance Structure is from Shoreline : bedrooms cooking & food prep facilities) N 1- $\mathcal{O}_{\overline{\mathbb{R}}}^{s}$ **유** # ROUAR SIS O 74873 Width: Width: Sanitary (Exists)
Privy (Pit) or Municipal/City (New) Sanitary Portable (w/service contract)
Compost Toilet Block(s) No. SPECIAL USE Sewer/Sanitary System is on the property? 8 Exprision: USD' Acrosse

ZDD' X150' Acrosse

ZDD' X150' Acrosse Recorded Document: (i.e. Property O What Type of Specify Type: グ **Dimensions** X120, Is Property in Floodplain Zone? Š B.O.A × >< \times Height: Height: ∑Yes XNo Attached

Ves No Cell Phone: 218-491-Plumber Phone Telephone Written Authorization Page(s) (1997) 715 687 OTHER -364 Are Wetlands
Present?
□ Yes

X No Footage Square Salar Salar Water S V Well City

Address to send permit

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12h

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

(If you are signing on behalf of the owner(s) a letter $\mathcal{AH}\mathcal{H}$ \mathcal{L} $\mathcal{L}\mathcal{H}\mathcal{L}$

of authorization

ROAIS

BOLAN

Attach

Copy of Tax Statement

From the property send your Recorded Deed

Date

Authorized Agent:

(If there

are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

<u>. T</u>						T	valvii Bea		, <u>-</u>		oth one one	2 2 2	Se Se	95 35	Se		_					~ [
hld For Sa	Signature of Inspector:	Condition(s):Town; C	Date of Inspection:	Inspection Record:	Was Parcel Legally Created Was Proposed Building Site Delineated	Granted by Variance (B.O.A.) □ Yes XNo	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	Permit #: /4/A	Issuance Information (County Use Only)		Prior to the placement or construction of a structure within ten (10) feet of the Minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting	Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	Setback from the Established Right-on-N Setback from the North Lot Line	Setback from the Centerline of Platted Road	(8) Setbacks: (measured to the closest point) Wild			18			
witarv:	of Inspec	s):Town, Con	spection	tion Record: Attall	Was I posed Bu	/Variano	cel a Sub 1 Comm cture No	L Land	Inform	(9)	ement or c surveyed sement or c surveyed or	Septic T Drain Fi Privy (P	m the S	m the E	m the C	(8) S						(1) Sh (2) Sh (3) Sh (4) Sh (4) Sh (5) Sh (6) Sh (7) Sh
	itor.	N m	P	$ \mathscr{L} $	Parcel Le Iilding Si	æ (B.O.≱	Standal on Owne	1-0339	nation	Stake o	construction corner or reconstruction onstruction or reconstruction or reconstruction of the syon at t	ank or l	Vest Lot	stablish Jorth Lo	enterlir	etbacks: (m	4					Show Location Show / Indicat Show Location Show: Show: Show: Show any (*): Show any (*):
		mittee or Board	16-14	2/2	gally Cre te Deline			- 0	(Count	NOTICE	n of a struct harked by a n of a struct other prev	Holding	t Line (c Line Line	ed Righ	le of Pla	s: (meas	*					Show Location of: Show / Indicate: Show Location of (*): Show: Show: Show any (*): Show any (*):
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- 1	1	L. English Williams (Conditions Attached		•	XYes [(Deed of Record)			ed Locat d Use Pe New One The loca	ten (10) fee rveyor at th han ten (10 eyed corner		2		ad	Setbacks: (measured to the closest point) UAIUE Measuremen			0			Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Fro All Existing Structures of (*) Well (W); (*) Septic (*) Lake; (*) River; (*) Slo (*) Wetlands; or (*) Slo
	Furtel	ons Attached? LUMCM LUMA +	'n		□ □ 		ecord) ntiguous l	R 7	Sá	tion(s) c rmits Exp & Two & Town,	t of the thir as owner's a feet but le , or verifiab	522		15	, (sest pol			,			d Const d) on Plo V) on Plo way <u>an</u> ing Stru (W); (*) ; (*) Riv lands; o
	67	in the sale	Inspected by:				.ot(s))	Permit Date:	Sanitary Number:	of New Coire One Family D	nimum requesters. ss than thir is by the Di	+ 	2007	0/1/	[W]	oint) WHUE						ruction pt Plan d (*) Fro ctures o ctures o Septic er; (*) Slo
fold For		nabitati	by:///	3			ON X ON X	e: 3	imber:	onstruc (1) Year welling: Jity, State	ired setbac ty (30) feet epartment	Feet Feet	Feet Feet	Feet	Feet	3 (2)	\(\(\(\) \)				7	Proposed Construction North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (All Existing Structures on your Proper (*) Well (W); (*) Septic Tank (ST); (*) (*) Lake; (*) River; (*) Stream/Creek; (*) Wetlands; or (*) Slopes over 20%
Hold For Affidavit:		2 3 3	te					.//2		tion, Set from the ALL Mur e or Fede	k, the boun from the m by use of a					ROAD						toad (Na roperty roperty); (*) Dr reek; or
 		they need to	ital		Were Pr	eviously Yes 🔏	Mitigation Required Mitigation Attached	74		ptic Tank Date of nicipalitie aral agen	dary line fro inimum rec	Setback to Well	20% Slo Elevatio	Setback	Setback		Si .					(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*): (8) Show any (*): (8) Show any (*): (9) Construction (1) On Plot Plan (1) On Plot Pl
		8, 900	ľ		орегту Ц	Granted Vo	Require Attache			(ST), <u>Dr</u> Issuance Is Are Re cies may	om which the	to Well	pe Area	from the	from the	If	1	The state of the s	Administration of the Property of the State	1		itage Ro
Hold F	-	attached.) Water ture:			Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance □ Yes 🔏 No	d □ Yes		# of be	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DE), Holding Tank (HT), Privy (P), a NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	dary line from which the setback must be measured must be visib inimum required setback, the boundary line from which the setb corrected compass from a known corner within 500 feet of the pr	-	20% Slope Area on property Elevation of Floodplain	Setback from the Bank or Bluff	Lake (anges in Des			!			Proposed Construction North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (* (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
Hold For Fees:					resented Propert	nce (B.O.A.)	es Ø,No		# of bedrooms:	ruction of Enforce uire peri	nust be me indary line to corner with		berty	or Bluff	ordinary	es in plans m	70					ig Tank
		under pressure			by Own / Survey	.). C	66			olding T or Use ha or The Un nits.	asured mus rom which in 500 feet			2	high-wa	ust be a	Z Z				₹	(HT) and
		Z	Da	Zon	er Xves	_	Affid Affid		San	ank (HT) Is not be iform Dv	the visible the setbad of the prop				water mar	pproved	\$ (B)		8	4		3/or (*)
	Date 2	\$ 1	te of Re	Zoning District Lakes Classification	res res		Affidavit Required Affidavit Attached		nitary Date:	gun. welling C	from one p k must be n xosed site o				ark)	by the l	をそ		1) Privy (P)
whitement with the description of the same	Date of Approval: 14	ξ.	Date of Re-Inspection:	rict fication				-	te	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	previously surveyed corner to measured must be visible fron of the structure, or must be	1/2	\(\frac{1}{\text{Ves}}\)		NUM	Changes in plans must be approved by the Planning & Zoning Dept. Description Measurement			ξ_ 2			
and a feel of the second section in the second	jal: / 4		ion:	TAS			□ Yes □ Yes			Well (W	surveyed co					ning & Zoning D		M		~~	/	/
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